

Alaska's Resolutions

For the 2005 White House Conference on Aging

Note: The rationale statements included below focus on the advantages of implementing each resolution. They do not purport to list the full implications, including costs and other disadvantages, of the proposed policies and priorities.

Health and Long-Term Care

Increase Access to Health Care:

1. The U.S. government shall ensure that reimbursement rates for the care of people on Medicare and Medicaid are sufficient so as to be commensurate with the actual cost of care.

Rationale:

- Many physicians concur that Medicare reimbursement is a critical issue for maintaining the viability of their practice, and that Congress' failure to address this issue endangers older Americans' access to needed health care services.
 - For many years, Medicare's reimbursement rates have failed to keep up with inflation and with the modernization of medical care.
 - When doctors cannot afford to take patients because Medicare does not cover the necessary costs of providing health care, everyone suffers. The health care system becomes unreliable for seniors, and inadequate Medicare reimbursement rates lead to higher costs for patients and higher insurance rates for employers.
 - The Medicare Payment Advisory Commission (MedPAC), an independent federal body set up to advise Congress on issues that affect Medicare, recommends that doctors' Medicare reimbursement rates be increased by 2.7 percent in FY 2006, rather than decreased by 5.2 percent as current federal law dictates.
 - The AMA and MedPAC both argue forcefully that the formula used to calculate physician reimbursement for Medicare services is faulty and should be changed. Medicare payments to doctors are driven by what is commonly called the "sustainable growth rate" (SGR) system. The system is based on changes in four factors: the number of beneficiaries in the Medicare fee-for-service program, costs of services, law and regulation, and the nation's gross domestic product (GDP).
 - Seniors responding to the Alaska Commission on Aging's survey of senior concerns (2005) frequently noted the difficulty in locating a physician who will accept Medicare patients. This problem was especially notable in the Anchorage and Fairbanks areas.
2. The U.S. government shall study the options for restructuring the United States' health care system to provide for more comprehensive, equal, accessible care for all citizens. This study shall include input from the insurance industry, the

pharmaceutical industry, business representatives, medical professionals, and health care consumers.

Rationale:

- Many countries, and all industrialized countries except for the United States, provide a system of single-payer universal health care for all citizens.
- The American health care system is by far the most expensive in the world. The United States spends more than twice the OECD (Organization for Economic Cooperation and Development) median amount per capita on health care, and significantly more than its closest competitor, Switzerland. The approximately \$1.7 trillion in national health expenditures (NHE) in 2003 represents 15.3% of the Gross Domestic Product (GDP), three times larger than the industry's share in 1960.
- Nevertheless, high health care expenditures are not necessarily reflected in better health. Life expectancy is considered an overall measure of the quality of life in a country. Americans' life expectancy ranks 46th among all countries, outpaced by such countries as Singapore (#4), the Cayman Islands (#13), Liechtenstein (#18), Guam (#37), and Jordan (#42).
- Health care cost spending in the United States continues to rise at a level far outpacing the rate of inflation. The cost of health insurance has increased 73% just in the past five years (2000 – 2005).
- The American public is faced with a patchwork system of multiple different levels of coverage depending on the person's age, employment, income, and other factors. Currently only 60 percent of American employers provide any type of health insurance for their employees. 45 million Americans were uninsured in 2003. Many more faced higher deductibles, erosion of coverage, and periods without coverage between jobs. Low-wage earners are least likely to be covered by employer-sponsored health insurance. These people often earn too much money to qualify for Medicaid, but not enough to afford health insurance for their families. Those covered by Medicare may find that certain products or services are not covered, and that providers are reimbursed at a rate which is less than the cost of providing the service. Thus they are at the mercy of physicians who may decide not to take on patients covered by Medicare.
- A 2003 Harris poll found that most of the American public (56 percent) does not view health care as a business which should be guided by the profit motive. Most people would prefer that health care services be delivered by non-profit organizations or the government. According to a 2004 Harris poll, substantially more Americans say they feel more favorably about the Canadian health care system than about the U.S. health care system, by 49 percent to 34 percent.
- In Alaska's community forums, participants consistently told us that they want to see one system of care for all Americans. Many enter their retirement years with fears for children and grandchildren who are uninsured, and with anxiety about the cost of long-term care and other health care costs consuming all of their life savings in their later years.

Emphasize Prevention:

3. Federal and state government and the health insurance industry shall emphasize prevention and wellness programs, including the provision of coverage for preventive care designed to deter or forestall chronic disease.

Rationale:

- Prevention and wellness care can prevent or delay the onset of chronic disease, thus saving money, strain on the health care system, and suffering for seniors.
- Alaskan seniors have expressed great interest in participating in prevention programs that are readily accessible to them, in locations such as their senior centers.
- Seniors are frustrated by medical coverage which does not pay for preventive care. For the many seniors living on small fixed incomes, this creates a disincentive for them to avail themselves of such care, even when they want to use such methods to maintain their health.
- The National Association of State Units on Aging favors strengthening the Medicare program to provide preventive services.

Support Caregivers and Providers:

4. The U.S. government shall provide a tax break for individuals who provide in-home long term care services for a family member who meets nursing home level of care standards as determined by a medical examination.

Rationale:

- Nationally, the average annual cost of a private room in a nursing home is \$69,400, or as high as \$200,000 in Alaska. A private one-bedroom unit in an assisted living facility has an average annual cost of \$30,300. The average hourly rate for home health aides was \$18.58. Family caregivers provide care for no cost or an extremely low cost relative to all these alternative forms of care.
 - Often family members caring for an elderly relative who requires full-time care give up their paying work outside the home in order to provide that care. The family suffers a loss of income, while the health care system likely saves a substantial amount of money which would otherwise go to a nursing home, assisted living facility, or home care provider. It makes sense for families to be able to receive a tax break calculated to compensate them to some degree for the loss of income they endure while caring for a relative with extraordinary needs. This would also act as an incentive for more families to undertake in-home care under these circumstances.
5. Doctors other than pediatricians shall be encouraged to have a prescribed level of geriatric education as well as continuing education units in aging and palliative care. The U.S. government shall also provide incentives to encourage more physicians and other health care professionals to adopt a geriatric specialty.

Rationale:

- The U.S. is suffering from a shortage of doctors trained to care for elderly patients. While the number of older Americans is rising quickly, particularly those over 85 and in the frailest health, the number of doctors trained to meet their needs is in short supply. Further, there is a problem of inadequate training in geriatrics for other physicians. Many medical schools do not require course work in geriatrics, or even offer geriatrics as an elective course.
- Many of those physicians who routinely deal with elderly Americans (surgeons, internal medicine specialists, orthopedic physicians, family physicians, et al) have little training and exhibit minimal understanding of the special life circumstances and needs of the elderly.
- Seniors expect health care providers to have appropriate education and training to meet their health care needs. They also wish to be treated with respect, interest, and dignity by health care providers.
- The aging of the Baby Boom generation has created new urgency for understanding and expanding geriatric medical services. With more seniors now choosing to retire in Alaska, our state has the second-fastest growing proportion of seniors among all the states. Within the next 25 years Alaska's age 65+ population will more than triple.

Control Costs:

6. The U.S. government should acknowledge consumers' concerns and work together with the pharmaceutical industry to find ways to achieve a reduction in the cost of prescription drugs.

Rationale:

- The public, particularly seniors on fixed incomes, is universally concerned about the high cost of prescription drugs.
- U.S. residents pay more for prescription drugs than do residents of any other country. Many do not have good insurance coverage for pharmaceuticals, and thus end up paying increasingly high monthly costs from their often limited incomes. There are currently no controls of any kind on prices. Many seniors have been forced to resort to bus trips to Canada and Mexico to obtain prescription drugs at a price they can afford.
- Many pharmaceuticals were originally created using U.S. taxpayer funds by way of federal research and development grants.
- The pharmaceutical industry is one of the most profitable sectors of the U.S. economy.
- The new Medicare Part D option is excessively complex and confusing, and even those seniors choosing the new coverage may find themselves paying more for increasingly expensive drugs.

7. The U.S. government shall require simplification of paperwork required by insurance companies and government programs such as Medicare and Medicaid.

Rationale:

- Seniors find medical paperwork tedious and unnecessarily complex and demanding. Many seniors have declining eyesight and fine motor skills. In 2005, it should be possible for a person's name and Social Security number (or other unique identifier) to trigger access to whatever additional information (on prior diagnoses, prior services, etc.) is needed.
- States are also burdened by excessive levels of documentation required by Medicaid.
- Paperwork reduction mandates have succeeded in other domains, and could be equally successful in the health care and in-home services fields.

Increase Resources:

8. The U.S. government shall increase resources for programs to provide medical transportation (rides to doctor visits, medical tests, etc.) for seniors under the Older Americans Act, Title III program.

Rationale:

- While many communities offer senior transportation programs to one degree or another, many seniors find themselves unable to obtain rides to and from medical appointments in a timely manner. There may be problems getting a reservation for a ride, the ride may routinely arrive late, or the person may live in an area of town not served by the transportation system. A separately-funded segment of the transport system dedicated exclusively to driving seniors to and from their doctor visits, medical tests, day surgery appointments, etc. would fill a much-noted void in the senior transport system.
9. The U.S. government shall expand funding for and provide incentives to states to implement and/or expand consumer-directed care and in-home care programs for seniors, thereby avoiding more costly care in nursing homes.

Rationale:

- Older Americans Act annual appropriations for the past decade have not increased commensurate with the increased cost of living or the growing number of older Americans.
- Alaska has one of the fastest-growing percentages of seniors in its population. The number of seniors in the state is expected to more than triple in the next 25 years. This rapid increase is due to the aging of the baby boomer generation, many of whom migrated to Alaska during the 1970s and 1980s, as well as an increasing percentage of retired Alaskans wishing to remain living in the state (at one time, many left for "the lower 48" after retirement).
- People desire to age with dignity and independence in their own homes and communities.

- Baby boomers will want more control, as they expect to be instrumental in the decision-making processes regarding their own care.

10. The U.S. government shall keep its promise to veterans to provide them with medical services and hospital care for the rest of their lives.

Rationale:

- Veterans of the U.S. armed forces were guaranteed lifetime medical and hospital care by the Veterans Administration.
- Many veterans are frustrated by their continuing inability to gain access to such care. Their needs are minimized and their demands for care ignored.
- A country such as the U.S. which boasts a first-class military should also be proud to offer first-class care to its military veterans. They gave years of their lives to the cause of defending the country, and seek only to collect on the promises made them.
- Oftentimes health problems experienced by veterans may have had their roots in the period during which they served in the military (Agent Orange, Gulf War Syndrome, etc.).

11. The U.S. government shall create a “domestic Peace Corps” of retired medical personnel to work with seniors, helping take some of the burden off doctors.

Rationale:

- Seniors who are retired from the medical professions have a wealth of knowledge to share and energy with which to assist fellow seniors in maintaining their health. They may be more attuned to the concerns of seniors, and have more time to spend with each individual, than today’s overburdened practitioners .
- A domestic retiree medical corps modeled on the Peace Corps could operate to inspire a large group of seniors, bring medical care to those who have had difficulty accessing services, and act as an interface between the medical profession and senior clients.

12. The U.S. government shall enact tort reform or other legislation designed to reduce medical costs by limiting liability.

Rationale:

- Some experts believe that the rising costs of medical liability insurance are partially responsible for the rapidly increasing cost of care.
- Limiting medical damage recovery could be expected to lower the costs of liability insurance accordingly.

Provide Information:

13. The U.S. government shall require that information about drugs and health issues be presented to consumers simply, honestly, and without slick marketing tactics.

Rationale:

- The U.S. is one of the few countries that allow the advertising of prescription drugs to the public. Many such ads are vague and misleading; often seniors are particularly susceptible to the imagery and suggestions contained in such ads. Recent evidence indicated that a number of the most heavily advertised, most frequently prescribed drugs were extremely dangerous to consumers, at times even resulting in their deaths. Evidence presented at Congressional hearings suggested that the Food and Drug Administration may be more loyal to the health of pharmaceutical profits than to the health of the American public.
- Seniors do want access to up-to-date information about new pharmaceuticals and procedures, but they want to be informed about in a manner which is dignified, objective, and where the information is non-biased and reliable.
- Most seniors rely on their primary health care provider to recommend appropriate medications and to provide education on side effects, etc.

Financial Security:

Preserve Social Security:

14. The Social Security program shall be preserved as a defined benefit program. No diminished benefit shall be allowed to be paid to any individual qualified to receive a retirement benefit.

Rationale:

- Social Security has been the most successful program in our country's history. People look upon it as a promise that our nation has made to workers, to their families, and to retirees. Social Security has helped millions of Americans to maintain a comfortable standard of living during retirement.
 - Fewer employers today provide an employee pension program (60 percent in 2005). Others, including some of America's largest employers, are defaulting on their pension plans on account of bankruptcy or chronic underfunding of the plans. Private retirement investments by individuals are subject to the vicissitudes of the financial markets. For many people, their Social Security retirement benefit is the only defined benefit they can count on, and most seniors are reluctant to approve any changes to the program which could result in uncertain or decreased benefits.
15. The U.S. government shall remove the \$90,000 salary cap for Social Security payroll tax deductions.

Rationale:

- Currently only wages up to \$90,000 per year are subject to Social Security payroll tax deductions. This means that someone earning \$1m million per year pays the same Social Security payroll tax as someone earning \$90,000 per year.
- If the \$90,000 cap were completely eliminated in 2005, it could bring in about \$100 billion in one year, according to Social Security Administration

spokesman Mark Lassiter. Agency actuaries have not looked farther into the future, Lassiter said, but if the change generated an average \$100 billion each year, it could more than erase Social Security's deficit.

16. Before any changes are made in the Social Security program, a valid fiscal plan must be developed and made available to the public. The plan should reflect accurate, objective information that is easy to understand for the general public.

Rationale:

- Many seniors felt that the recent debate on the need for change to the Social Security system and the merits of the suggested changes was conducted in an excessively politicized atmosphere where facts, careful research, and expert projections took a back seat to various political agendas. Many felt that no public policy change of such a high level of importance should be made without providing the public with detailed but comprehensible fiscal projections for the various alternative plans as well as objective assessments of the likely results of adopting each alternative (including the choice of making no changes to the current program).

Teach Financial Literacy:

17. Federal, state and local governments shall develop and require a financial literacy curriculum beginning in elementary school. The federal government shall establish incentives for states that implement financial literacy programs.

Rationale:

- Personal savings and investments will need to form a greater and greater percentage of Americans' retirement incomes due to declines in the availability of pensions and other defined benefit programs.
- Participants in our Alaska community forums stressed again and again that young people need to become familiarized with the country's financial system early in life so that they are prepared to take advantage of every opportunity to invest in their own future. Seniors felt that schools should offer financial literacy education beginning in the earliest grades, perhaps even with a program to encourage kindergarten students to save money. Some of today's seniors feel that they themselves could have benefited from lifelong financial literacy education opportunities; the nation cannot afford to allow another generation of students to grow to adulthood with little or no knowledge of personal finance. But because we are all aware that the schools already have too many "unfunded mandates" to fulfill, such a program should be funded at least in part by the federal government.

Encourage Senior Employment:

18. Congress shall consider developing tax credits or other incentives for employers who hire and retain older workers.

Rationale:

- More and more seniors are finding that their retirement incomes are insufficient to provide them with the standard of living they had hoped for in their later years. Others would like to continue making use of their talents and abilities by working. Some prefer to continue working because the extra income gives them a greater sense of self-reliance and allows them to carry out special activities such as traveling. For all these reasons seniors are choosing to return to (or remain in) the labor force.
- Not only are individuals living longer after they retire, but they are healthy enough to continue working or performing productive activity longer than previously was the case.
- The aging of the baby boom generation will substantially increase the number of mature individuals in the labor force. By 2006, more than 15% of the U.S. labor force is projected to be aged 55 or older.
- Seniors seeking work report difficulty obtaining jobs, particularly well-paying jobs. Many believe that employers subscribe to erroneous views of older Americans as sickly, dim-witted, computer illiterate, and unable to fit in with a younger work force. Generally those employers have little or no actual experience with older workers. Many surveys of human resource managers have shown that they view older workers as loyal, dependable, experienced, reliable, service-minded, with good judgment, and aware that they have to give in order to receive.
- Tax credits or other government incentives for employers to hire and retain older workers would encourage them to hire older workers and thus experience the value they represent and the assets they offer.

Change Tax Laws That May Burden Seniors:

19. The U.S. government shall overhaul federal income tax regulations to make them fairer and less complex.

Rationale:

- The U.S. tax code is voluminous, excessively complex, and results in an unfair burden of taxation on certain taxpayers, often those least able to afford to pay or hire tax professionals.
- Seniors often feel burdened by taxation of their modest wages and benefits, including those who are not eligible to itemize, even with high out-of-pocket health care costs.
- Seniors participating in our community forums wanted to be able to deduct medical expenses directly, rather than conforming to the formula for computing deductibility of such expenses. They would like to see the end of tax breaks for various special-interest groups. And a simplified tax code that could be understood by the lay person would be highly desirable as well.

Encourage Personal Savings and Investments:

20. The U.S. government shall consider additional incentives and changes to the tax code to encourage personal savings accounts, IRAs and other personal investments, and health care savings accounts, without income cap restrictions.

Rationale:

- In an era of increasing uncertainty regarding pensions and Social Security benefits, personal savings and investments are more and more important to the financial security of future seniors. Currently, the U.S. has a very low savings rate. While some tax incentives and other policies do exist to encourage savings, many participants in Alaska's community forums felt that the government is not doing enough to move Americans in the direction of taking responsibility for their own financial security in retirement.
- Advocates of savings incentives and other asset-building programs for the poor convincingly make the case that while low incomes are the proximate cause of poverty at any point in time, the inability to accumulate wealth is what keeps people and their families stuck in poverty for generations.
- In a recent study by H&R Block and a group of economists, tax filers were randomly offered no match, a 20 percent match, and a 50 percent match on contributions made to a new or existing IRA. The study found that higher match rates significantly raise IRA participation and contributions. Average IRA contributions for the 20 percent and 50 percent match groups were four and eight times those of the control group, respectively. [The match came from study funds; however, policy changes to encourage IRA participation could provide for matches by the government or employers.] The study also found that professional tax assistance, information provision, and ease of saving are other factors which can play important roles in encouraging IRA contributions by low- and moderate-income families.
- Among other ideas to encourage savings are: allowing split income tax refunds (where part of the refund goes to a savings account and the other part to a checking account; many families need at least a portion of their refund for day-to-day expenses, but would save a portion of the refund if they could do so electronically); providing a match of up to \$500 a year for low-income taxpayers who save a portion of their tax refund in a targeted savings account (IRA, 529, etc.); allowing parents to save in "Children's Retirement Savings Accounts" which would convert to a standard Roth IRA when the child turns 18; expanding Individual Development Accounts (IDAs) – matched savings accounts usually targeted to education and training, buying of a first home, or starting a small business; setting up an "American Stakeholder Account" for every child born in the United States; making enrollment in a company's 401(K) plan automatic rather than "opt-in"; creation of universal, portable 401(K) accounts; revising asset limits in public assistance programs (with low asset limits currently acting as a huge disincentive for savings); and many others.

Reform Health Care:

21. The U.S. government shall update the Medicare and Medicaid programs based on today's economics and health care costs.

Rationale:

- Many seniors in Alaska say they find it difficult to access health care because doctors refuse to take on patients covered under Medicare and Medicaid due to low reimbursement rates, and burdensome paperwork that is costly to process.
- Health care cost inflation has increased the cost of insurance premiums by 73% since 2000 – rising more than five times faster than overall inflation during that period. The average annual premium for a family of four totals more than total wages for a minimum-wage worker. These increases in premiums make it more and more difficult for employers – especially small employers – to offer health care coverage to their workers. These workers may end up on Medicaid, or may join the ranks of the uninsured. (The cost of providing care to the uninsured is partially responsible for the continued health care cost inflation.)

Provide Financial Safety Nets for Seniors:

22. The U.S. government shall enforce existing laws and/or expand them to protect corporate and government pensions and retiree health plans.

Rationale:

- Pension defaults such as those by Bethlehem Steel and United Airlines are growing. Many individuals with long careers working for an employer who had offered an attractive pension are finding themselves without funds for retirement. Further, many other pension plans are underfunded, making them especially vulnerable to downturns in the stock market and other shifts in the country's economy.
- Many Americans are not only at risk of collecting much less in pensions than their employers have promised – they are also losing promised health care coverage during their retirement years.
- The Pension Benefit Guaranty Corporation (PBGC,) the federal agency that insures traditional pensions, is already facing more than a \$9 billion shortfall. A default by United Airlines would saddle it with an additional \$8.4 billion in unfunded obligations. If other airlines follow, the PBGC may have to go to Congress and plead for a bailout that some experts say would be bigger than the Savings and Loan debacle of the 1980s.
- Twenty years ago, 40 percent of American workers were covered by traditional pensions known as defined-benefit plans. Today that number has dropped to 20 percent. As the Bethlehem Steel and United examples show, plans within that 20 percent may also be compromised. Currently, about 75 percent of those corporate plans are underfunded. And corporations' premiums to the PBGC do not reflect the real costs of insuring the pensions. For example, over the years United has paid into the PBGC only \$50 million

dollars. If it defaults, it will saddle the government insurance agency with \$6.4 billion dollars worth of claims.

23. The U.S. government shall review the formula used for computing the national poverty level, as current poverty guidelines understate the extent of poverty in the U.S. today.

Rationale:

- The current system of measuring poverty is outdated and seriously underestimates the number of people who need assistance in meeting their most basic living expenses.
- The current Alaska poverty level for a single-person household is \$11,950 (about \$996 per month) and for a two-person household it is \$16,030 (about \$1,336 per month). The cost of a one-bedroom apartment in some Alaska communities can be more than \$700 per month. When the costs of food, utilities, fuel, medicine, transportation, and other necessities are added, it can be very difficult for Alaskan seniors on fixed incomes to make ends meet.
- According to the 2000 Census, slightly over 8 percent of Alaska seniors lived at poverty level. However, in its 2005 survey of senior concerns, the Alaska Commission on Aging found that 20 percent of the respondents said their monthly incomes were not sufficient to pay for all their necessities. Another 36 percent said that although they were able to cover all their necessities, they had very little left over for extras.
- The minimum wage no longer lifts the worker's income above the poverty level for a family of four, as it did in the 1960's and early 70's. A full-time worker earning the Alaska minimum wage of \$7.15 per hour earns a gross income of less than \$15,000 a year, which leaves a wage earner with one child below the poverty level.
- The original formula for computing U.S. poverty levels was based on a 1955 survey of food consumption conducted by the USDA. When the poverty guidelines were first implemented in the early sixties, they were based on the assumption that families spent about a third of their after-tax income on food; thus, the poverty levels represented the amount of money a family of a given size was expected to spend on food, multiplied by a factor of three. In 1963, a family of four was expected to spend \$1,033 per year on food, so the poverty level for a family of four was set at \$3,100 per year. Poverty levels have been indexed to changes in the Consumer Price Index over the years, but have never been re-calibrated based on the relative costs of various items in the standard of living for today's families. Families no longer spend one-third of their income on food. Today, food accounts for about one-sixth of the family budget, with housing, transportation, utilities, and child care now making up much larger components of family spending.
- Programs and policies impacting seniors that use poverty guidelines to determine eligibility include Medicaid, Food Stamps, the Low-Income Home

Energy Assistance Program (LIHEAP), and in Alaska the SeniorCare program. Public housing programs, such as HUD's Section 8, use the area median income to determine eligibility.

Community Resources:

Support Information/Referral and Access to Services for Consumers:

24. The U.S. government shall increase funding under the Older Americans Act for the Long Term Care Ombudsman program to prevent and treat elder abuse.

Rationale:

- Surveillance for elder abuse is limited and the problem remains greatly hidden. Findings from the [National Elder Abuse Incidence Study](#) suggest that more than 500,000 Americans aged 60 and over were victims of domestic abuse in a recent year. This study also found that only 16 percent of the abusive situations are referred for help; 84 percent remain hidden. While a couple of studies estimate that between 3 percent and 5 percent of the elderly population have been abused, the Senate Special Committee on Aging estimates that there may be as many as 5 million victims every year. One consistent finding, over a ten-year study period, is that reports have increased each year.
- Alaska has the second-fastest growing senior population of all the states in the U.S.
- Additional funding for the prevention and treatment of elder abuse should be put in place before the surge in the senior population begins in earnest during the next ten years. Currently elder abuse is an "invisible" issue, with many citizens unaware of how to identify a suspicious situation. Additional federal funds would enable states' Long Term Care Ombudsmen to expand advocacy and education activities and supplement their volunteer program in underserved communities.

Invest in Workforce Development for Senior Services:

25. The U.S. government shall provide reduced-cost education loans for students committing to serve in the professional health care and in-home care direct services fields.

Rationale:

- There is already a significant worker shortage in the health care and direct services fields. As the massive baby boomer generation begins to age, the need for additional personnel in these fields will grow exponentially over the next 25 years.
- The cost of post-secondary education in the U.S. has increased at a rate double that of the overall inflation rate for the past 13 years, with average costs now at over \$10,000 a year at public 4-year colleges and over \$24,000 a year at private 4-year colleges. Many of the young people who would be

interested in health care and services careers are unable to afford the cost of the necessary schooling or the required time away from the full-time workforce.

- Previous programs offering education grants or reduced-cost loans have proven to be a successful method of obtaining workers in fields such as public health for areas such as remote and rural communities in Alaska.

26. The U.S. government shall create a Civilian Conservation Corps type program for seniors, to utilize the energy, experience, and insight of seniors for community enhancement.

Rationale:

- Many seniors are in good health and have a lifetime of experience and learning which they would be happy to share with their communities in the service of specific projects and programs. Many would be pleased to do so with just a stipend to cover their mileage and other incidental expenses.
- Many seniors in our society feel a sense of isolation from the work of their community, and would like to be integrated into the leadership roles which seniors may expect routinely in some other cultures. Our statewide community forums demonstrated beyond dispute that today's seniors are a largely untapped resource for a wealth of creative ideas and concern for the well-being of the entire community.
- The Civilian Conservation Corps (CCC) was a public works program that put over 3 million young adults to work from 1933 to 1942. Most of the participants lived in camps and worked on projects such as tree-planting, road-building, fire-fighting, and erosion control efforts. The Works Projects Administration (WPA) was a related federal program of the Depression era, which also employed artists and writers on projects such as the creation of public art and the collection of family histories and slave narratives. Today's seniors could be stationed on tasks as varied as community planning, creation and maintenance of parks and community gardens, documentation of local history and architecture, emergency and disaster planning, and countless other projects which would benefit their communities.

27. The U.S. government shall expand the Job Corps and AmeriCorps programs to include vocational training programs to prepare young people for providing senior services.

Rationale:

- As the senior population grows, it is becoming increasingly difficult to maintain a stable, well-educated direct services workforce. Many young people are unaware of the opportunities in the direct services field, cannot afford the necessary schooling, or do not have the parental support and guidance for pursuing a vocation.
- Job Corps is the nation's largest and most comprehensive residential education and job training program for at-risk youth, ages 16 through 24. Job

Corps combines classroom, practical, and work-based learning experiences to prepare youth for stable, long-term, and often high-paying jobs.

- AmeriCorps is a network of local, state, and national service programs that connects more than 70,000 Americans each year in intensive service to meet our country's critical needs in education, public safety, health, and the environment. AmeriCorps members serve with more than 3,000 nonprofits, public agencies, and faith-based and community organizations. Since 1994, more than 400,000 adults have provided needed assistance to millions of Americans across the nation through their AmeriCorps service.

28. The U.S. government shall expand and fund housing programs such as those under HUD (Dept. of Housing and Urban Development) and Rural Development (Dept. of Agriculture) which provide vouchers for low-income seniors and those with special needs. It shall expand and provide increased funding for the development of housing programs that integrate housing and in-home services for special needs populations, such as seniors and individuals with disabilities.

Rationale:

- Participants in Alaska's community forums and survey of senior concerns repeatedly identified the need for more senior housing in their communities as a critical issue. Recurring themes included the need for senior housing that is accessible, affordable and available to those at all income levels; more single-level housing; accessible housing designed to be senior-friendly and to meet the needs of people with disabilities; on-site services such as case management, health screening and monitoring, information and referral, transportation, and chore helpers; housing environments with classroom space and rooms for social gatherings, exercise, arts and hobbies; senior housing with graduated levels of care from independent living through assisted living; more long-term care housing options for small communities; location in a "town center" environment where residents can walk to stores, parks, library, etc.; the desire to see combinations of public and private investment to provide the housing seniors want.
- Many seniors express the desire to move from their long-time family homes to a more compact, single-level living space at some time in the future. They worry that, when they want or need to make that move, their community may not have enough appropriate housing available, or opportunities may be restricted on the basis of income.
- Alaska's senior population is expected to grow by 128% percent in the 15-year period between 2004 and 2019 as the baby boomer population begins to age and chooses to spend their retirement years in Alaska.
- The inflating cost of land and housing construction often places privately developed housing out of the reach of many seniors living on fixed incomes or with deflated pensions.
- Communities benefit greatly by encouraging the "clean industry" of retirement. Seniors often serve as family caregivers and provide a large amount of volunteer services to community organizations and intergenerational activities.

